Healthy Mothers, Healthy Babies

For more information about CDC's reproductive health program,
visit http://www.cdc.gov/nccdphp/drh/index.htm

Florida

Saving the Lives of Infants in Florida: The Back to Sleep Campaign

Public Health Problem

In Florida in 1996, an unusually large number of babies were dying of sudden infant death syndrome (SIDS). Florida PRAMS data indicated that only 25% of infants were put to sleep on their backs (28% white and 15% African American).

Evidence That Prevention Works

For more than a decade, CDC has worked with state and local health departments and others to detect deaths and health problems among pregnant women and infants, determine the causes of these problems, and develop solutions. A critical part of this effort is CDC's state-based Pregnancy Risk Assessment Monitoring System (PRAMS), which collects data on the health of infants and health and health-related behaviors of pregnant women and new mothers. Research indicates that putting infants to sleep on their backs or sides rather than on their stomachs can decrease their risk of dying of SIDS.

Program Example

In response to the PRAMS data, the Northeastern Florida Healthy Start Coalition launched a "Back to Sleep" educational campaign targeting health care professionals and new parents. Students from Jacksonville University assembled packets of educational materials about placing infants on their backs to sleep. The packets were distributed to day care centers and hospitals in the region for training programs for nurses. Activities focused on parents included distributing baby T-shirts with the "Back to Sleep" logo on the back. Following this campaign, 1998 PRAMS data indicated that 56% of infants were placed on their backs in northeast Florida (64% white and 43% black) compared with 37% of infants statewide (42% white and 21% black). In addition, the SIDS death rate in the region decreased from 1.2 deaths per 1,000 live births in 1997 to 0.74 deaths per 1,000 in 1998.

Implications

The Northeastern Florida Healthy Start Coalition continues to use PRAMS data to monitor infant sleeping position. The coalition is now refining its education efforts to better reach African American parents to reduce racial disparities in SIDS. By detecting health problems among mothers and babies and by sharing results from programs like these, PRAMS is helping chart the course for maternal and infant health in the United States.

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Oklahoma

Promoting Healthy Youth Behaviors to Reduce Teen Pregnancy: A Community Partnership Approach

Public Health Problem

In 2000, Oklahoma had a teen birth rate well above the United States average, ranking 13th in the birth rate among young women aged 15 to 19 years. Some Oklahoma City neighborhoods experience a teen birth rate *three to four times* the national average.

Evidence That Prevention Works

Research suggests that linking teen pregnancy prevention programs with youth development efforts shows promise in addressing the antecedents of teen pregnancy and reducing adolescent risk-taking behaviors.

Program Example

Funded by CDC and coordinated by the Oklahoma Institute for Child Advocacy, the *HEART of OKC* (Healthy, Empowered And Responsible Teens of OKC) was one of 13 teen pregnancy prevention projects that were part of a community capacity-building initiative. From the outset, the *HEART of OKC* focused on changing adult views of youth from negative, deficit-based perspectives to strength-based perspectives that promoted increasing specific protective factors—*youth assets*—while also reducing health risk behaviors that lead to the onset of early sexual activity. From the beginning, community partners agreed that the purpose of the project was to change the perspective of community leaders and other adults so that they recognized young people as potential to be nurtured, not problems to be fixed. The *HEART of OKC* emphasized a blending of science-based principles, promising approaches, and best practices. The project interventions engaged diverse groups of young people in leadership and service-learning opportunities with a range of community partners from Home Depot to the Junior League to central city congregations. As a result, new partnerships, promising new program models, and a new attitude of working "with and through youth," not doing things "to and for youth," has emerged. In addition, the project coordinators developed a youth survey and conducted 1,300 pairs of interviews with teens and adults.

Implications

Organizations that have not traditionally worked together are collaborating to help each other develop resources, implement joint programs, and effectively refer youth and parents to appropriate programs and services. This project demonstrates the importance of a collaborative approach and demonstrates the need for community-driven projects.

Contact Information

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Washington

Implementing a Pilot Program to Promote Smoking Cessation During and After Pregnancy

Public Health Problem

In 1994, nearly 18% of Washington State women smoked during pregnancy, and approximately 70% of these women were covered by Medicaid. The smoking rate of women increased to nearly 25% of women after pregnancy.

Evidence That Prevention Works

Research indicates that smoking during pregnancy contributes to adverse birth outcomes, such as spontaneous abortion, stillbirth, fetal death, low birth weight, premature birth, and intrauterine growth retardation. Women who do not smoke or quit smoking have better reproductive health outcomes, and children of nonsmokers and former smokers have fewer health problems than those exposed to tobacco smoke.

Program Example

The state of Washington created the First Steps program to provide Medicaid-covered health and social services—such as substance abuse education and child birth education—to low-income pregnant women. The Department of Social and Health Services Medical Assistance Administration and the Department of Health Maternal and Child Health Program jointly managed the state program. Data from the Pregnancy Risk Assessment Monitoring System (PRAMS) were used as a catalyst for developing a statewide First Steps tobacco cessation pilot project. Washington used PRAMS county smoking rates for pregnant Medicaid women to determine which First Steps agencies should participate. The project enhanced the interventions offered by First Steps providers and supported smoking cessation during and after pregnancy in an effort to reduce low birth weight rates and infants' exposure to environmental tobacco smoke.

Implications

PRAMS data were used to guide program planning. Outcome data are being used to develop recommendations for a statewide training program. This program demonstrates the importance of PRAMS data in evaluating changes in smoking cessation rates during pregnancy.

Contact Information

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West Virginia

Promoting a Folic Acid Education Program to Prevent Birth Defects

Public Health Problem

Data from West Virginia's CDC-supported Pregnancy Risk Assessment Monitoring System (PRAMS) for 1997 showed that 73.9% of women delivering a live-born infant were aware of the benefits of folic acid, but these women did not supplement their diet with a daily dose of folic acid before or during pregnancy.

Evidence That Prevention Works

Research indicates that 400 milligrams of folic acid taken every day by women of childbearing age can reduce the risk of brain and spinal cord (neural tube) defects by up to 70% when taken before and continued early in pregnancy.

Program Example

West Virginia used PRAMS data to develop the Folic Acid Education Project, which was conducted from July 1999 to December 1999. The purpose of the prject was to increase public and professional awareness about the importance of using folic acid before pregnancy to prevent birth defects of the spinal cord and brain. Information about folic acid and its benefits was distributed to women of childbearing age throughout West Virginia through displays in health clinics and health fairs. A statewide toll-free number was also established to answer questions about the use of folic acid. In McDowell County, a southern rural county in the state, the education project was expanded to include the distribution of multivitamins. Multivitamins were distributed to family planning providers to be given out free of charge to participating women. By the conclusion of the project, 2,500 bottles of multivitamins containing folic acid had been distributed.

Implications

The folic acid education program may be expanded to increase private health care providers' awareness of the West Virginia Birth Defects Registry, a system established in 1989 to monitor the occurrence of birth defects among the state's children. The program demonstrates the importance of determining the effectiveness of awareness campaigns and the importance of timely and accurate data collection.

Contact Information

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